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Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (800) 293-4075

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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13 MAY -3 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.

Hankel Realty LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

MAY 03 2013
D. BUTLER

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

H13000101070

ARTICLE I - Name

The name of the Limited Liability Company is: **Hankel Realty LLC**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

4555 Atlantic Avenue, Unit 4506

4555 Atlantic Avenue, Unit 4506

Ponce Inlet, FL 32127

Ponce Inlet, FL 32127

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

The name and Florida street address of the registered agent are:

Udo Haase

Name

4555 Atlantic Avenue, Unit 4708

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Ponce Inlet, FL 32127

(City / State / Zip)

13 MAY -3 AM 9:51
711770

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.


Registered Agent's Signature - Udo Haase

ARTICLE IV - Manager(s) or Managing Member(s):

H13000101070

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM


Udo Haase - 4555 Atlantic Avenue, Unit 4708, Ponce Inlet, FL 32127

MGRM

Eloise Haase - 4555 Atlantic Avenue, Unit 4708, Ponce Inlet, FL 32127

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Udo Haase

Typed or printed name of signee

13 MAY -3 AM 9:51
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